

TRANSMITTAL SLIP		DATE
TO: <i>Ch/G</i>		<i>9/3</i>
ROOM NO.	BUILDING	
REMARKS:		
<p><i>See AD's note on attached enclatip, please.</i></p> <p><i>file</i></p>		
FROM: <i>OAD/KH</i>		
ROOM NO.	BUILDING	EXTENSION

FORM NO. 241
1 FEB 55

REPLACES FORM 36-8
WHICH MAY BE USED.

(47)